

# BLANKET PURCHASE ORDER

## STATE OF MARYLAND

\*\*\*\*\* STATE OF MARYLAND \*\*\*\*\*

BPO NO: 001B0400656

PRINT DATE: 04/29/10

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### SHIP TO:

AS SPECIFIED ON INDIVIDUAL ORDERS

**VENDOR ID:** 1411414684

VIROMED LABS INC  
6101 BLUE CIRCLE DR

MINNEAPOLIS, MN  
(952 ) 931-0077

55343

### REFER QUESTIONS TO:

MALLELA RALLIFORD  
(410 ) 767-4281  
MALLELA.RALLIFORD@DGS.STATE.MD.US

**ITB:** 001IT818066

**EXPR DATE:** 05/01/13

**POST DATE:** 04/29/10

**DISCOUNT TERMS:** .

NET 30 DAY

**CONTRACT AMOUNT:**

.00

### TERMS:

ARTICLES HEREIN ARE EXEMPT FROM MARYLAND SALES AND USE TAXES BY EXEMPTION CERTIFICATE NUMBER 3000256-3 AND FROM FEDERAL EXCISE TAXES BY EXEMPTION NUMBER 52-73-0358K. IT IS THE VENDOR'S RESPONSIBILITY TO ADVISE COMMON CARRIERS THAT AGENCIES OF THE STATE OF MARYLAND ARE EXEMPT FROM TRANSPORTATION TAX.

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CELL CULTURES

FOR

DEPARTMENT OF HEALTH & MENTAL HYGIENE

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### CONTACT INFORMATION

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VIROMED: REGINA AIKEN, (952) 563-3300

FAX: (952) 563-4101

DHMH: QUEEN DAVIS, (410) 767-5335

QDAVIS@DHMH.STATE.MD.US

CONTRACT PERIOD: APRIL 29, 2010 THRU APRIL 30, 2013.

QUOTED PRICES ARE TO BE NET 30 DAYS F.O.B. STATE USING AUTHORITIES AND INCLUDE FREIGHT/SHIPPING, HANDLING AND ADMINISTRATION CHARGES. ALL DISCOUNTS ARE TO BE DEDUCTED AND REFLECTED IN NET PRICES.

THIS QUOTATION IS SUBMITTED WITH THE UNDERSTANDING THAT THE VENDOR

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### TERMS (cont'd):

SHALL COMPLY WITH ALL FEDERAL AND STATE OSHA REGULATIONS, THE STATE OF MARYLAND PROCUREMENT REGULATIONS IN EFFECT AT THE TIME OF SUBMISSION AND THE INSTRUCTIONS PROVIDED HERE-IN.

THIS IS A FIRM, FIXED PRICE CONTRACT IN THAT NO PRICE ESCALATION SHALL BE ALLOWED. HOWEVER, IN THE EVENT OF ANY DECREASE IN PRICE DUE TO MARKET CHANGE, OR OTHER CONDITIONS, THE STATE OF MARYLAND SHALL BE NOTIFIED PROMPTLY AND RECEIVE SUCH DECREASES.

CORPORATE "P" PURCHASING CARDS WILL BE USED FOR PAYMENT FOR ALL INDIVIDUAL AGENCY CONTRACTS OF \$2,500 OR LESS.

<u>LINE #</u>	<u>STATE ITEM ID</u>	<u>U/M</u>	<u>UNIT COST</u>
0001	27013-70103D	TU	1.7000
RHESUS MONKEY SV5/SV40 ANTISERA 16X125MM SCREW CAP TUBES			
RMK SV5/SV40 (16 X 125 ROUND BOTTOM TUBES), VIROMED# 14-309.			
0002	27013-014302	TU	1.5500
MRC5 TUBES, RABBIT KIDNEY CELLS, 16X125MM			
MRC-5 (16 X 125 ROUND BOTTOM TUBES), VIROMED# 14-302.			
0003	27013-013302	VL	1.6000
MRC5 SHELLVIAL, RABBIT KIDNEY, 1 DRAM VIAL			
MRC-5 FLAT BOTTOM SHELL VIALS, VIROMED# 13-302.			

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<u>LINE #</u>	<u>STATE ITEM ID</u>	<u>U/M</u>	<u>UNIT COST</u>
0004	27013-072214	TU	1.5500
RD RHABDOMYOSARCOM TUBES, 16 X 125			
RD CELLS (16 X 125 ROUND BOTTOM TUBES), VIROMED# 13-314.			
0005	27013-V13306	VL	1.6000
SHELLVIAL, MCY CELLS - REGULAR W/ SCREW CAP & COVERSIP			
MCCOY SHELL VIALS REGULAR, VIROMED# 13-306.			
0006	27013-V13406	VL	1.6000
SHELLVIAL, MCY CELLS - LIGHTS W/ SCREW CAP & COVERSIP			
MCCOY SHELL VIALS, LIGHT, VIROMED# 13-406.			
0007	27013-101101	EA	15.5000
CHLAMYDIA OVERLAY MEDIUM 100ML VIROMED # 10-110-100			
CHLAMYDIA OVERLAY MEDIUM, 100 ML, CAT.# 10-110-100.			

END OF ITEM LIST

VENDOR MUST INCLUDE THE 9-DIGIT ZIP CODE OF COMPANY ADDRESS ON ALL INVOICES. FAILURE TO DO SO MAY RESULT IN DELAY OF PAYMENT. ALL PRODUCTS USED IN PACKING TO CUSHION AND PROTECT DURING THE SHIPMENT OF COMMODITIES ARE TO BE MADE OF RECYCLED, RECYCLABLE, AND/OR BIODEGRADABLE MATERIALS.

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AUTHORIZED BY: \_\_\_\_\_ DATE: \_\_\_\_\_

BUYER AUTHORIZED DESIGNEE